PTC/SB/30 (07-09)

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Request for Continued Examination (RCE) Transmittal Address to: Ball Stop RCE Commissioner for Patents P.O. Box 1450 Alexandria, VA 22313-1450	Application Number	10/786,727-Conf. #2729		
	Filing Date	February 25, 2004		
	First Named Inventor	Joseph L. Mark		
	Art Unit	3736		
	Examiner Name	J. G. Hoekstra		
	Attorney Docket Number	65937-0045		
This is a Request for Continued Examination (RCE) under 37 CFR 1.114 of the above-identified application.				
Request for Continued Examination (RCE) practice under 37 CFR 1.114 does not apply to any utility or plant application filed prior to June 8, 1995, or to any design application. See Instruction Sheet for RCEs (not to be submitted to the USPTO) on page 2.				

	equired under 37 CFR 1.114 Note: If the RCE is proper, an			
	nclosed with the RCE will be entered in the order in which they we not wish to have any previously filed unentered amendment(s) en			
a. x Previ	ously submitted. If a final Office action is outstanding, any be considered as a submission even if this box is not chec	amendn ked.	nents filed	after the final Office action
i(c	onsider the arguments in the Appeal Brief or Reply Brief pre	eviously f	iled on _	
ii. X	ther After Final Amendment filed on June 30, 20	009		
b. Enclo	sed			
i	mendment/Reply iii. Information I	Disclosu	re Statem	ent (IDS)
il. L A	ffidavit(s)/Declaration(s) iv. Other			
2. Miscellaneo	IS			
a. Susp	ension of action on the above-identified application is requ	ested un	der 37 CF	R 1.103(c) for a
perio	d of months. (Period of suspension shall not exc	eed 3 mo	nths; Fee u	inder 37 CFR 1.17(i) required)
b. Othe				
B. Fees The	RCE fee under 37 CFR 1.17(e) is required by 37 CFR 1.114 w	hen the F	RCE is file	i.
a. X The I	Director is hereby authorized to charge the following fees.	any unde	payment	of fees, or credit any
Over	payments, to Deposit Account No18-0013			
i. X F	CE fee required under 37 CFR 1.17(e)			
ii. 🗆 E	xtension of time fee (37 CFR 1.136 and 1.17)			
ii. 🗍 (	other			
	WALL TO SERVICE THE SERVICE TH			
b. Check in the amount of \$ enclosed				
c. Payment by credit card (Form PTO-2038 enclosed)  VARNING: Information on this form may become public. Credit card information should not be included on this form. Provide				
redit card information and authorization on PTO-2038.				
SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT REQUIRED				
Signature	/Kristin L. Murphy/	Date	August	24, 2009
Name (Print/Type)	Kristin L. Murphy	Registra	ation No.	41,212

I hereby certify that this paper (along system in accordance with § 1.6(a)(4	Request for Continued Examination Transmittal with any paper referred to as being attached or enclosed) is being transmitted via the Office electronic filing ).
Dated: August 24, 2009	Electronic Signature for Kristin L. Murphy: /Kristin L. Murphy/